

An immediate effect and a rapid over-all response

Prompt tranquilization occurs and provides evidence of initial improvement in some patients. In others, an immediate stimulatory effect is observed. Generally, a peak is rapidly reached and is soon followed by lasting over-all improvement.

Of those patients who responded to Aventyl HCl, 50 percent improved within one week, 79 percent by the second week, and 94 percent within one month.

Well-tolerated therapy

Unwanted effects appear to be milder and less frequent than those produced by certain other antidepressants. Studies indicate Aventyl HCl has considerably less anticholinergic activity than certain of its predecessors.

In contrast to some tranquilizers, Aventyl HCl has not been reported to cause either habituation or withdrawal symptoms.

1. Cahn, B. Guidelines for Understanding Functional Disorders. M. Times 73:1082, 1968.

2. From data available through the Lilly Research Laboratories.

when patients display
behavioral drift:
Aventyl® HCl
Nortriptyline
Hydrochloride

Lilly

Additional information available
to physicians upon request.
Eli Lilly and Company
Indianapolis, Indiana 46206



Actions and Indications: Aventyl HCl is a notably well-tolerated and effective agent for the treatment of mental depression, anxiety tension states, and psychosomatic disorders and for use as an adjunct to psychotherapy.

Contraindications: Concomitant use with a monoamine oxidase inhibitor is contraindicated, since potentiation of adverse effects can be serious—even fatal. The monoamine oxidase inhibitor should be discontinued for at least ten to twenty-one days before treatment with Aventyl HCl is started.

Warnings: Use in convulsive or hypotensive states should be closely followed. At present, data are insufficient to recommend use of Aventyl HCl during pregnancy. The possibility of a suicidal attempt in a depressed patient should always be considered. Although there have been no reports of long narrow damage or other serious effects, careful observation of the patient and periodic laboratory studies are recommended as with all new medications.

Precautions: Because of its anticholinergic activity, Aventyl HCl should be used cautiously in patients with glaucoma or in those having a propensity for urinary retention. Care should be employed when Aventyl HCl is given in conjunction with antipathomimetic drugs. Its use in hypnosis along with intravenous barbiturate-methamphetamine for severe anxiety has resulted in a higher than usual

side effect. As with similar drugs, it is advisable to observe for epileptiform seizures during the initial phase of treatment.

Side-Effects: No single side-effect can be considered as occurring frequently, and most are mild and transitory. Dry mouth was noted in 26 percent of patients; drowsiness in 11 percent. The following were seen occasionally (in 6 to 10 percent): constipation, dizziness, tremulousness, confusion state, restlessness, weakness, and blurred vision. Side-effects rarely noted (in 1 to 5 percent) were epigastric distress, sweating, peculiar taste, fatigue, weight gain, weight loss, insomnia, headache, paraesthesia, nausea and vomiting, rash and itching, and delayed micturition. Miscellaneous side-effects were reported in less than 0.5 percent. There have been no reports of habituation or of withdrawal symptoms. No potentiation or increased incidence of side-effects was observed when Aventyl HCl was used together with tranquilizers, other antidepressants (except MAO inhibitors), and stimulants, sedatives, hypnotic preparations, and standard drugs given for primary medical disorders.

Dosage: Most adults respond well to 15 mg. three times daily, but the dose should be adjusted to the needs of the patient.

Usual dosage range (in divided doses):

Adults—20 to 100 mg. daily.

Children—10 to 75 mg. daily (1 to 2 mg. per Kg. of body weight). (See package literature for complete dosage information.)